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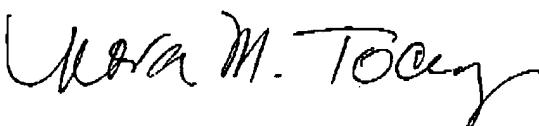
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To: Hector A. Agdeppa Art Unit: 2642 United States Patent and Trademark Office	From: Nora M. Tocups RE: Serial No. 09/530,723 Atty No. 0201-97055US
Fax: 703.872.9314 and 703.872.9306	Date: December 19, 2003

Total pages, including cover: 14

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- Fax Cover Sheet
- Transmittal Form
- Fee Transmittal
- Amendment and Response to the Office Action Mailed
- June 19, 2003 and
- Petition for Extension of Time (in duplicate)
- Credit Card Payment Form


Nora M. Tocups, Reg. 35,717
On December 19, 2003

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PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

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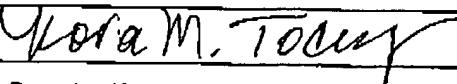
(to be used for all correspondence after initial filing)

		Application Number	09/530,723
		Filing Date	05/02/00
		First Named Inventor	Bedingfield
		Group Art Unit	2642
		Examiner Name	H. Agdeppa
Total Number of Pages in This Submission		Attorney Docket Number	0201-97055

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="text-align: center;">Credit Card Payment Form</div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Nora M. Tocups	
Signature		
Date	December 19, 2003	

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date:

Typed or printed name	Nora M. Tocups	
Signature		Date
	December 19, 2003	

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FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 950.00)

Complete If Known	
Application Number	09/530,723
Filing Date	May 2, 2000
First Named Inventor	Bedingfield
Examiner Name	H. Agdeppa
Art Unit	2642
Attorney Docket No.	0201-87055

METHOD OF PAYMENT (check all that apply)

Check Credit card Money Other None
 Deposit Account;

Deposit Account Number

Deposit Account Name

The Director is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments
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FEES CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)		
1001 770	2001 388	Utility filing fee	<input type="text"/>
1002 330	2002 166	Design filing fee	<input type="text"/>
1003 520	2003 260	Plant filing fee	<input type="text"/>
1004 750	2004 375	Reissue filing fee	<input type="text"/>
1006 160	2005 80	Provisional filing fee	<input type="text"/>

SUBTOTAL (1) (\$)

2. EXTRA CLAIM FEES

Total Claims	-20 **	=	Extra Claims	X	Fee from below	=	Fee Paid
Independent Claims	<input type="text"/>	-3 **	<input type="text"/>	X	<input type="text"/>	=	<input type="text"/>
Multiple Dependent				X	<input type="text"/>	=	0

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1202 18	2202 9	Claims in excess of 20	<input type="text"/>
1201 84	2201 42	Independent claims in excess of 3	<input type="text"/>
1203 280	2203 140	Multiple dependent claim. If not paid ** Reissue independent claims over original patent	<input type="text"/>
1204 84	2204 42	** Reissue claims in excess of 20 and over original patent	<input type="text"/>
1205 18	2205 9		<input type="text"/>

SUBTOTAL (2) (\$)

** or number previously paid, if greater. For Reissues, see above

FEES CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1051 130	2051 55	Surcharge - late filing fee or oath	<input type="text"/>
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	<input type="text"/>
1053 130	1053 130	Non-English specification	<input type="text"/>
1812 2,520	1812 2,520	For filing a request for reexamination	<input type="text"/>
1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action	<input type="text"/>
1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action	<input type="text"/>
1251 110	2251 55	Extension for reply within first month	<input type="text"/>
1252 410	2252 205	Extension for reply within second month	<input type="text"/>
1263 830	2253 465	Extension for reply within third month	<input type="text"/>
1254 1,450	2254 725	Extension for reply within fourth month	950.00 <input type="text"/>
1255 1,870	2265 965	Extension for reply within fifth month	<input type="text"/>
1401 320	2401 160	Notice of Appeal	<input type="text"/>
1402 320	2402 160	Filing a brief in support of an appeal	<input type="text"/>
1403 280	2403 140	Request for oral hearing	<input type="text"/>
1451 1,510	1451 1,510	Petition to institute a public use proceeding	<input type="text"/>
1452 110	2452 55	Petition to revive - unavoidable	<input type="text"/>
1453 1,300	2453 650	Petition to revive - unintentional	<input type="text"/>
1501 1,300	2501 650	Utility issue fee (or reissue)	<input type="text"/>
1502 470	2502 235	Design issue fee	<input type="text"/>
1503 630	2503 315	Plant issue fee	<input type="text"/>
1460 130	1460 130	Petitions to the Commissioner	<input type="text"/>
1807 50	1807 50	Processing fee under 37 CFR 1.17 (q)	<input type="text"/>
1806 180	1806 180	Submission of Information Disclosure Statement	<input type="text"/>
8021 40	8021 40	Recording each patent assignment per property (times number of properties)	<input type="text"/>
1809 750	2809 375	Filing a submission after final rejection (37 CFR § 1.129(a))	<input type="text"/>
1810 750	2810 375	For each additional invention to be examined (37 CFR § 1.129(b))	<input type="text"/>
1801 750	2801 375	Request for Continued Examination (RCE)	<input type="text"/>
1802 800	1802 800	Request for expedited examination of a design application	<input type="text"/>

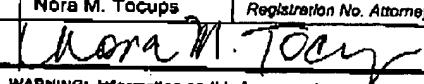
Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

850.00

SUBMITTED BY

Name (Print/Type)	Nora M. Tocino	Registration No. Attorney/Agent	35,717	Telephone	404.372.1430	Complete if applicable
Signature				Date	December 19, 2003	

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